

CIPA COMPLIANCE CERTIFICATION FORM
for Public Libraries

As the authorized library representative, I hereby certify that the library is
(check only **one** of the following boxes)

- A. ☐ CIPA Compliant
The applicant library has complied with the requirements of Section 9134(f)(1) of the Library Services and Technology Act.

OR

- B. ☐ The CIPA requirements do not apply because no funds made available under the LSTA program will be used to purchase electronic equipment capable of accessing the Internet or to pay for direct costs associated with accessing the Internet.

Printed name of library director

Signature of library director

Date